

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000059591**

Entity Name

ROSA CORPORATION**FILED****Feb 26, 2000 8:00 am**
Secretary of State

02-26-2000 90072 001 ***158.75

Principal Place of Business SW 18 ST FL 33145	Mailing Address 6003 SW 18 ST MIAMI FL 33145-1917
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Principal Place of Business 109 NW 17 Ave	3. Mailing Address 3109 NW 17 Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State MIAMI FL	City & State MIAMI FL
Country USA	Country USA
Zip 33142	Zip 33142



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0850422	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent**BARRIOS, JOSE A JR**
3003 SW 18 ST
MIAMI FL 33145**7. Name and Address of New Registered Agent**Name
JHON RAFAEL TORRES
Street Address (P.O. Box Number is Not Acceptable)
16495 NW 37 PLACE
City
OPA LOCKA FL Zip Code
33055

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

The corporation is eligible to satisfy its intangible
filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00!**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees**OFFICERS AND DIRECTORS**

TD BARRIOS, JOSE A SR 3003 SW 18 ST MIAMI FL 33145	☐ Delete
VSD BARRIOS, LYDIA 3003 SW 18 ST MIAMI FL 33145	☐ Delete
PD BARRIOS, JOSE A JR 3003 SW 18 ST MIAMI FL 33145	☐ Delete
	☐ Delete
	☐ Delete
	☐ Delete

12.**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Del JHON RAFAEL TORRES 16495 NW 37 PLACE OPA LOCKA, FL 33055	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tusame OLGA MARIA TORRES 16495 NW 37 PLACE OPA LOCKA, FL 33055	☒ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition

I certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director
of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if
on an attachment with an address with all other like empowered.SIGNATURE: **Jhon R Torres**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Filing Fee

2-14-00 (305)633-5826

CR2E034 (9/99)